

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM SPAC COVER SHEET PG 1

RECEIVED  
CITY OF SAN ANTONIO  
CITY CLERK  
2005 APR 29 PM 4:09

The SPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission filers)

2 Total pages filed:

3 COMMITTEE NAME

**Aquifer Protection Initiative**

### OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

4 COMMITTEE ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

**P.O. Box 328  
San Antonio, TX 78292-0328**

☐ Change of Address

5 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

**Mr. George**

**C.**

NICKNAME

LAST

SUFFIX

**Tim Hixon**

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

**315 Commerce, Ste. 300  
San Antonio, TX 78205**

7 CAMPAIGN TREASURER'S MAILING ADDRESS

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

**P.O. Box 328  
San Antonio, TX 78292-0328**

☐ Change of Address

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

**( 210 ) 225-3053**

9 REPORT TYPE

☐ January 15

☐ July 15

☐ 30th day before election

☒ 8th day before election

☐ Runoff

☐ Exceeded \$500 limit

☐ Dissolution (attach PAC-DR)

☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year

**3 / 29 / 05**

THROUGH

Month Day Year

**4 / 29 / 05**

11 ELECTION

ELECTION DATE  
Month Day Year

**5 / 7 / 05**

ELECTION TYPE

☐ Primary

☐ Runoff

☐ General

☒ Special

GO TO PAGE 2

# SPECIFIC-PURPOSE COMMITTEE REPORT

## PURPOSE AND TOTALS

FORM SPAC  
COVER SHEET PG 2

RECEIVED  
CITY OF SAN ANTONIO  
2005 APR 29 PM 4:09

12 COMMITTEE  
NAME

ACCOUNT #  
(Ethics Commission filers)

Aquifer Protection Initiative

13 COMMITTEE  
PURPOSE

(Attach lists on plain  
paper to complete this  
report if necessary.)

☐ CANDIDATE

CANDIDATE / OFFICEHOLDER NAME

☒ SUPPORT  
(Candidate or Measure)

☐ OFFICEHOLDER

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

☐ OPPOSE  
(Candidate or Measure)

☐ ASSIST  
(Officeholder)

☒ MEASURE

BALLOT IDENTIFICATION / #

ELECTION DATE  
Month Day Year

Proposition #1

5 / 7 / 05

DESCRIPTION This measure would allow for the  
city of San Antonio to purchase land and  
conservation agreements thereby protecting  
the Edwards Aquifer

14 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 520.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 22,626.48

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 12,584.93

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF THE REPORTING PERIOD

\$ 10,561.55

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ 0

15 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying  
report is true and correct and includes all information required to be  
reported by me under Title 15, Election Code.

Woodruff B. Halsey  
Signature of campaign treasurer

AFFIX NOTARY SEAL HERE

Sworn to and subscribed before me, by the said Woodruff B. Halsey, this the 29th day  
of April, 2005, to certify which, witness my hand and seal of office.

Delia Sandoval  
Signature of officer administering oath

Delia Sandoval  
Printed name of officer administering oath

Title of officer administering oath

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY OF SAN ANTONIO  
CITY CLERK

## **SCHEDULE A**

2005 APR 29 PM 4:00

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME Aquifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/5/05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Lukin T. Gilliland, Jr. 6 Contributor address; City; State; Zip Code 901 N.E. Loop 410, Ste. 909 San Antonio, TX. 78209	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/9/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Harry F. Neyes, III Contributor address; City; State; Zip Code 3302 Sackville Dr. San Antonio, TX 78247	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Roger & Dot Hemminghaus Contributor address; City; State; Zip Code P.O. Box 69600 San Antonio, TX 78269-6000	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Dolph Briscoe Contributor address; City; State; Zip Code P.O. Box 389 Uvalde, TX 78801	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/30/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Paul Barwick Contributor address; City; State; Zip Code 14 Ammann Rd. Boerne, TX 78006	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

2005 APR 29 PM 4:09

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME Aguifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/21/05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jack J. Spector	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 227 Devine San Antonio, TX 78209-5626			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/22/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Nelson Seffel	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 811 Lamanda Blvd. San Antonio, TX 78201			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/19/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Caroline A. Forgason	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 700 W. St. Mary's Ste. 1200 San Antonio, TX 78205-3593			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/22/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Deborah B. Brient	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 218 Grove Place San Antonio, TX 78209-5707			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/21/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Hall & Pat Hammond	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 215 Arglye San Antonio, TX 78209			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

2005 APR 29 PM 4:09

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2 FILER NAME Aquifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/21/05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Kit Goldsbury 6 Contributor address; City; State; Zip Code P.O. Box 460567 San Antonio TX 78246-0567	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/19/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: J. Marvin Smith III, M.D. Contributor address; City; State; Zip Code 204 Zambrano San Antonio, TX 78209	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: James G. Lifshutz Contributor address; City; State; Zip Code 215 W. Travis St. San Antonio, TX 78205	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ruth Russell Contributor address; City; State; Zip Code 615 Belknap San Antonio, TX 78212	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/14/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mary G. Wallace Contributor address; City; State; Zip Code 4040 Broadway Ste. 630 San Antonio, TX 78209	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

2005 APR 29 PM 4:09

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME Aquifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/21/05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Marilyn P. Vogel 6 Contributor address; City; State; Zip Code 680 E. Basse Rd. 226 San Antonio, TX 78209	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/26/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Herbert C. Bartling Contributor address; City; State; Zip Code 1610 Thrush Count Cir. San Antonio, TX 78248-1753	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jocelyn L. Straus Contributor address; City; State; Zip Code 555 Argyle San Antonio, TX 78209	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mark Allen Contributor address; City; State; Zip Code 2130 W. Summitt San Antonio, TX 78201	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: John W. Watson Contributor address; City; State; Zip Code 340 Treeline Park Apt. 1424 San Antonio, TX 78209-1844	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

2005 APR 29 PM 4:09

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule A:	
2 FILER NAME Aquifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/6/05	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Peter Selig	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 816 Camaron, Ste. 115 San Antonio, TX 78212			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/6/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Roger Sherman	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 219 E. Guenther San Antonio, TX 78204			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/6/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carter Smith	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 711 Navaro, Ste. 410 San Antonio, TX 78205			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: George C. Hixon	Amount of contribution (\$) \$7,500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 315 E. Commerce St. Ste. 300 San Antonio, TX 78205			
Principal occupation / Job title (See Instructions) Chairman of the Board		Employer (See Instructions) Hixon Properties	
Date 4/27/05	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Susan Hughes Campaign	Amount of contribution (\$) \$1,641.51	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 29427 San Antonio, TX 78229			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

**SCHEDULE C**

2005 APR 29 PM 4:09  
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The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule C:	
2 FILER NAME Aquifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/6/05	5 Corporation / Labor Organization name Lake Flato Architects  6 Corporation / Labor Organization address; City; State; Zip Code 311 Thirt Ste. Ste. 200 San Antonio, TX 78205	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
Date 3/31/05	Corporation / Labor Organization name Save Our Springs Alliance  Corporation / Labor Organization address; City; State; Zip Code P.O. Box 684881 Austin, TX 78768	Amount of contribution (\$) \$3,000.00	In-kind contribution description (if applicable)
Date 4/11/05	Corporation / Labor Organization name Martin Drought & Torres, Inc.  Corporation / Labor Organization address; City; State; Zip Code 300 Convent St. Ste. 2500 San Antonio, TX 78205	Amount of contribution (\$) \$104.00	In-kind contribution description (if applicable) Postage for campaign support mailing
Date 4/21/05	Corporation / Labor Organization name Trust for Public Land  Corporation / Labor Organization address; City; State; Zip Code 816 Congress Ave. Ste. 1550 Austin, TX 78701	Amount of contribution (\$) \$755.66	In-kind contribution description (if applicable) Direct mail for campaign support
Date 4/21/05	Corporation / Labor Organization name The Nature Consevarcy  Corporation / Labor Organization address; City; State; Zip Code P.O. Box 1440 San Antonio, TX 78295	Amount of contribution (\$) \$900.31	In-kind contribution description (if applicable) Direct mail for campaign support
Date 4/20/05	Corporation / Labor Organization name The Conservation Campaign  Corporation / Labor Organization address; City; State; Zip Code 33 Union St. 4th. Floor Boston, MA 02108	Amount of contribution (\$) \$2,000.00	In-kind contribution description (if applicable)

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# CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE C

2005 APR 29 PM 4:09

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages this Schedule C:	
2 FILER NAME Aquifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/6/05	5 Corporation / Labor Organization name Real Estate Council of San Antonio 6 Corporation / Labor Organization address; City; State; Zip Code 8706 Lockway San Antonio, TX 78217-4837	7 Amount of contribution (\$) \$2,000.00	8 In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED			



**POLITICAL EXPENDITURES**

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**SCHEDULE F**

2005 APR 29 PM 4:09

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:	
2 FILER NAME Aquifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)	
4 Date 4/4/05	5 Payee name Verizon Wireless	7 Amount (\$) \$172.79	
6 Payee address; City; State; Zip Code 11075 IH-10 West #301 San Antonio, TX 78230			
8 Purpose of payment (See instructions regarding type of information required.) mobile phone service		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 4/4/05	Payee name Columbia Design	Amount (\$) \$612.00	
Payee address; City; State; Zip Code 10300 NE 27th Ave. Vancouver, WA 98686			
Purpose of payment (See instructions regarding type of information required.) Bumper stickers		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 4/4/05	Payee name The Kitchens Group	Amount (\$) \$8,000.00	
Payee address; City; State; Zip Code 720 N. Maitland Ave. Ste. 104 Maitland, Fl. 32751			
Purpose of payment (See instructions regarding type of information required.) Public opinion poll		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 4/7/05	Payee name Dew Print	Amount (\$) \$280.92	
Payee address; City; State; Zip Code 16103 University Oak San Antonio, TX 78249			
Purpose of payment (See instructions regarding type of information required.) campaign pushcards		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
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CITY CLERK

# POLITICAL EXPENDITURES

## SCHEDULE F

2005 APR 29 PM 4:09

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F:
2 FILER NAME Aquifer Protection Initiative		3 ACCOUNT # (Ethics Commission filers)
4 Date  4/7/05	5 Payee name Guerra DeBerry Coody  6 Payee address; City; State; Zip Code 122 E. Houston, 2nd floor San Antonio, TX 78205	7 Amount (\$)  \$2,821.00
8 Purpose of payment (See instructions regarding type of information required.) campaign signs		9 <input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date  4/15/05	Payee name 621 Screen Printing  Payee address; City; State; Zip Code 621 E. Davey Pl. San Antonio, TX 78212	Amount (\$)  \$175.14
Purpose of payment (See instructions regarding type of information required.) campaign T-shirts		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date  4/15/05	Payee name 621 Screen Printing  Payee address; City; State; Zip Code 621 E. Davey Pl. San Antonio, TX 78212	Amount (\$)  \$175.14
Purpose of payment (See instructions regarding type of information required.) campaign t-shirts		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
Date  4/14/05	Payee name Home Depot  Payee address; City; State; Zip Code 12871 W IH10 San Antonio, TX 78249	Amount (\$)  \$58.94
Purpose of payment (See instructions regarding type of information required.) campaign sign stakes		<input type="checkbox"/> Complete if direct expenditure to benefit C/OH <input type="checkbox"/> Candidate / Officeholder name Office sought Office held
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CITY CLERK

# POLITICAL EXPENDITURES

## SCHEDULE F

2005 APR 29 PM 4:09

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 FILER NAME  
Aquifer Protection Initiative

3 ACCOUNT # (Ethics Commission filers)

4 Date  
4/27/05

5 Payee name  
Smith Print

7 Amount  
(\$)  
\$289.00

6 Payee address; City; State; Zip Code  
P.O. Box 690306  
San Antonio, TX 78269

8 Purpose of payment (See instructions regarding type of information required.)

Campaign Permit Envelopes

9 -- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount  
(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount  
(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount  
(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED